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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

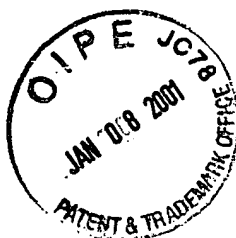
In re the application of

Douglas B. Moran

Application No. 09/651,303

Filed: August 30, 2000

For: EXTENSIBLE INTRUSION DETECTION  
SYSTEM



Examiner: Unassigned

Art Unit: 2131

January 3, 2001

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, DC 20231 on January 3, 2001.

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Jennifer C. Gross

SECOND REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner for Patents  
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Sir:

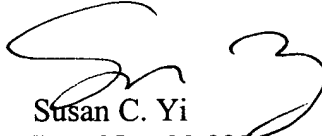
Enclosed is a copy of the Filing Receipt for the above-identified patent application. Please reprint the Filing Receipt as follows and mail the corrected copy to the undersigned.

Change the Continuing Data as Claimed by Applicant "THIS APPLN CLAIMS BENEFIT OF 60/151,531 08/30/1999" to -- "THIS APPLN CLAIMS BENEFIT OF 60/151,531 08/30/1999 AND 09/615,967 07/14/2000" --.

Attorney Docket No. RECOP012

Since this is a Patent Office typographical error, no fee should be due. However, the Commissioner is authorized to charge any fees that may be due to Deposit Account 50-0685 (Order No. RECOP012).

Respectfully submitted,



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/651,303	08/30/2000	2131	894	RECOP012	11	23	3

21912

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## FILING RECEIPT



\*OC000000005627845\*

DEC 26 2000

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Date Mailed: 12/19/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Douglas B. Moran, Palo Alto, CA ;

## Continuing Data as Claimed by Applicant

THIS APPLN CLAIMS BENEFIT OF 60/151,531 08/30/1999

AND 09/615,967 07/14/2000

## Foreign Applications

If Required, Foreign Filing License Granted 10/19/2000

## Title

Extensible intrusion detection system

## Preliminary Class

713

Data entry by : WARREN, EFREM

Team : OIPE

Date: 12/19/2000





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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/651,303	<b>FILING DATE</b> 08/30/2000 <b>RULE</b> -	<b>CLASS</b> 713	<b>GROUP ART UNIT</b> 2131	<b>ATTORNEY DOCKET NO.</b> RECOP012
<b>APPLICANTS</b> Douglas B. Moran, Palo Alto, CA ; <i>OK DJB</i>				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/151,531 08/30/1999 WHICH CLAIMS BENEFIT OF 09/615,967 07/14/2000 <i>OK DJB</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>OK DJB</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 10/19/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 11	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials				
<b>ADDRESS</b> 21912				
<b>TITLE</b> Extensible intrusion detection system				
<b>FILING FEE RECEIVED</b> 894	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	